

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Individual, Organization or Qualified Nonprofit Corporation Making the Disbursement/Obligations

(a) Name

Majority America Political Org

(b) Address (number and street) ☐ check if different than previously reported

P O Box 22928

2. FEC Identification Number

C C00000000

(c) City, State and ZIP Code

Alexandria

VA

22304

(d) Name of Employer or Principal Place of Business

(e) Occupation

3. Is This Statement

☒

New

or

☐

Amended

4. Covering Period

M M / D D / Y Y Y Y
10 / 22 / 2008

through

M M / D D / Y Y Y Y
10 / 28 / 20085. (a) Date of Public Distribution(s) M M / D D / Y Y Y Y
10 / 28 / 2008

(b) Communication Title Deafening

6. The filer is a(n): (a) ☐ Individual (b) ☒ Unincorporated Organization (c) ☐ Qualified Nonprofit Corporation (11 CFR 114.10)(d) ☐ Corporation, Labor Organization or Qualified Nonprofit Corporation making communications under 11 CFR 114.15(e) ☐ Other, specify: _____

7. Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account?

Yes ☒No ☐

8. Custodian of Records

(a) Name

Michael Smith

(b) Address (number and street)

P O Box 22928

(c) City, State and ZIP Code

Alexandria

VA

22304

(d) Name of Employer or Principal Place of Business

Majority America

(e) Occupation

President

9. Total Donations This Statement

.00

10. Total Disbursements/Obligations This Statement

19100.00

Under penalty of perjury, I certify that this statement is true, correct and complete.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

Michael Smith

SIGNATURE Electronically Filed by Michael Smith

DATE 10/29/2008

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. 437g.

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